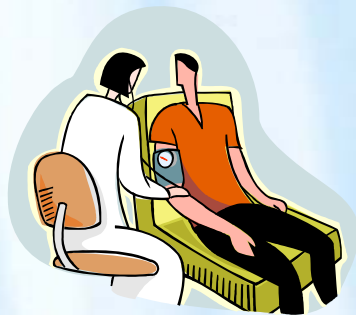


VA Medical Benefits and Eligibility for Combat Veterans & Families



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Overview

- Establishing Eligibility
- Health Service Priority Groups
- Copayments
- Additional Services
- Where to Seek More Information

Establishing Eligibility



Establishing Eligibility

- Contact a VA counselor, call or visit nearest VA clinic or medical center
- Documentation is needed to establish:
 - Basic VA Medical Benefit eligibility
 - Service-connected disability
 - Combat-related eligibility and/or disability

Basic Eligibility for Medical Benefits Noncombatants

A veteran is a person who:

- Served in the active military
- Discharged or released under conditions other than *dishonorable*

and/or

- Former or current Reservists if they served for the full period for which they were called (excludes training purposes)
- Former or current National Guard members if activated/mobilized by a Federal order

Combat Veteran Eligibility

Served on active duty in theater of combat after effective date of legislation, November 11, 1998

To Document Eligibility, submit:

- Proof of receipt of Global War on Terrorism Expeditionary Medal or similar medal demonstrating service in Afghanistan, Iraq or other combat locations.
- Copy of orders or some other documentation indicating service in a combat theater.
- Proof of receipt of hostile fire or imminent danger pay or combat pay tax credit.

Combat Veteran Eligibility (Cont)

- Priority access for two-year period following military service separation and placement in Priority Group 6 or higher
- Cost-free care for conditions determined possibly related to combat service during the two-year period
- Must apply within two years of discharge/release from active duty to receive the benefit

Copay Requirements (Cont)

Exemption from copay (regardless of income level), for conditions possibly related to combat military service during two-year post discharge period.

Exclusion examples:

- Conditions not related to service such as cold or flu
- Conditions that occurred after service such as a broken limb
- Conditions that pre-existed entry in service such as a congenital problem

Post Two-Year Combat Eligibility

- Combat veterans will remain enrolled at the end of the two-year period
- VA will reassess PG 6 combat veterans to determine appropriate priority group assignment
- If no special eligibility factors exist, enrollment will continue at a lower priority level (PG 7 or 8) in accordance with income level
 - **All applicable copay charges will apply**
- Veterans are notified of all status changes

Health Service Priority Groups

PG1 to PG8



Enrollment Priority Groups 1-5

- PG 1** - Service-Connected 50% or more disability rating
- PG 2** - Service-Connected 30% or 40%
- PG 3** - SC 10-20%, Purple Heart, POWs, veterans discharged due to disability incurred in service, veterans in vocational rehabilitation program
- PG 4** - Veterans receiving Aide & Attendance or Housebound VA pension benefits, or determined to be catastrophically disabled
- PG 5** - NSC & 0% SC noncompensable veterans with income below threshold, or receiving VA pension and/or eligible for Medicaid benefits

Enrollment Priority Group PG6

- Veterans who served in combat in a war after the Gulf War or during a period of hostility after November 11, 1998 for 2 years following discharge or release from the military
- Veterans with 0% service-connected conditions, but receiving VA compensation
- Veterans seeking care only for:
 - disorders relating to Ionizing Radiation and Project 112/SHAD
 - Agent Orange Exposure during service in Vietnam
 - conditions related to exposure to Environmental Contaminants during service in the Persian Gulf
 - Conditions related to participation in Project 112/SHAD
- Veterans of World War I or the Mexican Border War

Enrollment Priority Group PG7

Veterans who agree to specified copays with income and/or net worth above the VA income threshold and income below the Geographic Means Test (GMT) income thresholds.

- **Subpriority a:** Enrolled noncompensable 0% SC veterans who have remained continuously enrolled.
- **Subpriority c:** Enrolled NSC veterans who have remained continuously enrolled.
- **Subpriority e:** Noncompensable 0% SC veterans not included in *Subpriority a* above.
- **Subpriority g:** NSC veterans not included in *Subpriority c*.

Enrollment Priority Group **PG8**

Veterans who agree to specified copays with income and/or net worth above the VA Income threshold and the GMT thresholds.

- **Subpriority a:** Noncompensable 0% SC veterans enrolled as of January 16, 2003 and who have remained enrolled since that date.
- **Subpriority c:** NSC veterans enrolled as of January 16, 2003 and who have remained enrolled since that date.
- **Subpriority e:** Noncompensable 0% SC veterans applying for enrollment after January 16, 2003.
- **Subpriority g:** NSC veterans applying for enrollment after January 16, 2003.

Comprehensive Medical Benefits Package

Limited Benefits

- Preventive Care Services
- Inpatient and Outpatient Diagnostic and Treatment Services
- Prescription Services (as prescribed by VA Physician)
- Prosthetic and Rehabilitative Devices including Durable Medical Equipment
- Ambulance Service
- Eyeglasses
- Hearing Aids
- Home Health Care
- Dental Care
- Certain Counseling Services



Apply/Enroll - VA Medical Care

Application for Enrollment – 10-10EZ

- Obtain and submit on-line at www.1010ez.med.va.gov
- Mail or take application to your local VA Medical Center
- Enrollment letter sent notifying you of enrollment

Certain veterans need to submit household income information to determine if copay is applicable for treatment of non-combat related care and to determine their priority for enrollment.

Copayments



Copay Charges

- Outpatient Copayments
 - \$15 Primary Care
 - \$50 Specialty Care
- Inpatient Copayments
 - Standard copay charge for each cumulative 90 days of care within a 365-day period
 - Per diem charge (\$10) for each day of hospitalization
- Medication Copayments
 - \$8 per 30-day supply of medicine supplied on outpatient basis.
 - \$960 annual cap for veterans enrolled in PG 2-6.
- Long Term Care copayments can apply as well

Copay Requirements

- There is a **copay** requirement unless treated for service-connected illness or injury or for conditions related to placement in Priority Group 6.
- Financially needy veterans may request a copay exemption.
- 2006 income threshold levels:
 - ✓ \$26,902 – with no dependents
 - ✓ \$32,285 – with one dependent
 - ✓ Threshold increases \$1,806 for each additional dependent
 - ✓ \$80,000 – Property threshold

Post Two-Year Eligibility (Cont)

- Combat Veterans who do not enroll remain eligible to enroll based on other factors such as:
 - Compensable service-connected rating
 - Exposure to environmental contaminants
 - POW or Purple Heart recipient
 - VA pension
 - Catastrophic disability determination
 - Financial status

However, if application is made after January 16, 2003 and veteran is assigned priority PG 8, enrollment will be denied based on 2003 Enrollment Restriction

Additional Services Available



Help With Other Needs

Some patients may need other VA support besides that for behavioral health needs.

- Dental problems for vet
- Limited care for family member who is a vet.
- Chronic physical ailments (esp. pain).
- Bereavement or burial costs for a family member who is a vet.
- Employment help.
- Educational and housing aid.

Vet Centers

- Readjustment Counseling Services (RCS):
 - Assist in post-war adjustment
 - Bereavement counseling
 - Individual and group counseling
 - Benefits Assistance
 - Job Referral
 - Employment counseling & guidance
- Basic Eligibility:
 - Wartime Service
 - Other than Dishonorable Discharge



Limited Dental Benefits

- Veteran served at least 90 days of active duty
- Other than Dishonorable Discharge
- Military Discharge (DD214) indicates no dental care provided **within 90 days OF discharge**
- Application for dental benefits is submitted to VA **within 90 days AFTER discharge**

ChampVA

Health care program for spouse or widow(er) and children of a veteran not eligible for TriCare benefits who:

- Rated permanently and totally disabled due to SC disability
- Rated permanently and totally disabled due to a SC disability at time of death
- Died of a SC disability
- Died on Active duty

For more information contact:

1-800-733-8387 or www.va.gov/hac

Where to Seek More Information

Enrollment & Eligibility Questions/Assistance

- Military Point of Contact at local VA
- Enrollment Coordinator at local VA
- Patient Representative at local VA
- VA's Health Benefits Service Center toll free at 1-877-222-VETS (8387)
- VA via the Internet at www.va.gov & www.va.gov/healtheligibility
- OEF/OIF website: <http://www.vba.va.gov/efif/>
- Seamless Transition website: <http://www.seamlesstransition.va.gov/>